B1 (Official)	Form 1)(4/1	10)											
			United S East		Bankr istrict of						Vol	untary	Petition
	Name of Debtor (if individual, enter Last, First, Middle): Belmar, Sarah Jeanne							ebtor (Spouse w Michael		, Middle):			
All Other Na			or in the last 8 names):	years					used by the J maiden, and			years	
							FK	A Sarah	Jeanne Di	uchek			
Last four dig	e, state all)	Sec. or Indi	vidual-Taxpa	yer I.D. (ITIN) No./Co	omplete EI	(if more	our digits of than one, state	all)	· Individual-	Гахрауег I.I	D. (ITIN) N	o/Complete EIN
		r (No. and	Street, City, a	nd State)	:				Joint Debtor	(No. and St	reet, City, ar	nd State):	
	nnell Dr.							9 Donne					
Barnhar	rt, MO					ZIP Code		nhart, M	O				ZIP Code
						3012			6.1	D ' ' 1 DI	CD :		63012
Jefferso	n		cipal Place of				Jef	ferson	ence or of the	•			
Mailing Add	dress of Deb	otor (if diffe	rent from stre	et addres	s):		Mailin	g Address	of Joint Debte	or (if differe	nt from stree	et address):	
						ZID Code							ZID Code
						ZIP Code	\dashv						ZIP Code
Location of (if different			siness Debtor ove):		•								
	• •	Debtor			Nature of					of Bankruj			ch
		rganization) one box)		 □ Hea¹	Check of lth Care Busi	one box) iness		the Petition is Filed (Check one box) ■ Chapter 7					
Individu			~~~)	Sing	gle Asset Rea	al Estate as	defined	fined Chapter 7 Chapter 9 Chapter 15 Petition for Recognition					
	ai (includes ibit D on pa		· ·		in 11 U.S.C. § 101 (51B) Railroad			☐ Chapter 11 of a Foreign Main Proceeding			ě		
☐ Corporat	•		-	☐ Stockbroker ☐ Commodity Broker			☐ Chapte			hapter 15 Pe a Foreign N		0	
☐ Partnersl				☐ Clea	ring Bank	ter							
Other (If check this	debtor is not box and state			Othe				Nature of Debts (Check one box)					
			•		Tax-Exem (Check box,	if applicable	e)	■ Debts are primarily consumer debts, □ Debts are primari					
				unde	tor is a tax-exer er Title 26 of e (the Interna	the United	d States	"incurr	I in 11 U.S.C. § ed by an indivi- nal, family, or I	dual primarily		busin	ness debts.
	Fil	ling Fee (C	heck one box)		Check	one box:		Chap	ter 11 Debt	ors		
☐ Full Filing	g Fee attached	i							debtor as defin				
			(applicable to			Check i	if:					,	
	unable to pay		n installments. F										ders or affiliates) ee years thereafter).
l		ected (annlice	able to chapter	7 individus	ale only) Musi		all applicable						
			art's consideration			3. 🗒 🖁	Acceptances of		this petition. were solicited pr S.C. § 1126(b).	epetition from	one or more	classes of cr	editors,
Statistical/A				6 11 . 11			11.			THIS	SPACE IS F	OR COURT	USE ONLY
Debtor e	stimates tha	t, after any	be available exempt proper for distribution	erty is exc	cluded and a	dministrati		s paid,					
Estimated N					_	_	_	_	_				
1- 49	□ 50- 99	□ 100- 199	200-	□ 1,000- 5,000	5,001-	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000				
Estimated A									,				
\$0 to	\$50,001 to	\$100,001 to		\$1,000,001		\$50,000,001	\$100,000,001	\$500,000,001	More than				
\$50,000	\$100,000	\$500,000	to \$1 t	to \$10 million	to \$50	to \$100 million	to \$500 million	to \$1 billion					
Estimated Li	iabilities												
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 S to \$1 t	\$1,000,001 to \$10 million	\$10,000,001 to \$50	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million						

B1 (Official Form 1)(4/10) Page 2 Name of Debtor(s): Voluntary Petition Belmar, Sarah Jeanne Belmar, Drew Michael (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Location Date Filed: Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Margaret Farrell April 1, 2011 Signature of Attorney for Debtor(s) (Date) **Margaret Farrell** Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and

Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

after the filing of the petition.

B1 (Official Form 1)(4/10) Page 3

Voluntary Petition

(This page must be completed and filed in every case)

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Sarah Jeanne Belmar

Signature of Debtor Sarah Jeanne Belmar

X /s/ Drew Michael Belmar

Signature of Joint Debtor Drew Michael Belmar

Telephone Number (If not represented by attorney)

April 1, 2011

Date

Signature of Attorney*

X /s/ Margaret Farrell

Signature of Attorney for Debtor(s)

Margaret Farrell 58798

Printed Name of Attorney for Debtor(s)

Farrell Law Firm

Firm Name

13610 Barretll Office Dr, Ste 203 Ballwin, MO 63021

Address

Email: margaret@farrelllawoffices.com 314-965-1800 Fax: 314-529-3438

Telephone Number

April 1, 2011

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Belmar, Sarah Jeanne Belmar, Drew Michael

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

_		_	
•	~		

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Eastern District of Missouri

		stern District of Wilsboard		
In re	Sarah Jeanne Belmar		Case No.	
mic	Drew Michael Belmar	Debtor(s)	Chapter	7
	EXHIBIT D - INDIVIDUAL DE CREDIT CO	BTOR'S STATEMENT DUNSELING REQUIR		ANCE WITH
can d credit anoth	Warning: You must be able to check eling listed below. If you cannot do so ismiss any case you do file. If that hap ors will be able to resume collection a er bankruptcy case later, you may be steps to stop creditors' collection activ	y, you are not eligible to pens, you will lose what ctivities against you. If y required to pay a secon	file a bankrup tever filing fee your case is dis	tcy case, and the court you paid, and your smissed and you file
and fi	Every individual debtor must file this I le a separate Exhibit D. Check one of the	0 0 1	v	
oppor a certi	■ 1. Within the 180 days before the fi eling agency approved by the United Statunities for available credit counseling at ficate from the agency describing the sendebt repayment plan developed through	ntes trustee or bankruptcy nd assisted me in perform rvices provided to me. <i>At</i>	administrator t ning a related b	hat outlined the udget analysis, and I have
oppor not ha certifi	□ 2. Within the 180 days before the fi eling agency approved by the United Statunities for available credit counseling at ve a certificate from the agency describing the serve apped through the agency no later than 14	ntes trustee or bankruptcy nd assisted me in perform ng the services provided vices provided to you and	administrator thing a related by to me. You must a copy of any of	hat outlined the udget analysis, but I do at file a copy of a debt repayment plan
	☐ 3. I certify that I requested credit cout the services during the seven days from a stances merit a temporary waiver of the	the time I made my requ	est, and the fol	lowing exigent

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

now. [Summarize exigent circumstances here.]

□ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.] □ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness mental deficiency so as to be incapable of realizing and making rational decisions with respect financial responsibilities.); □ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of by unable, after reasonable effort, to participate in a credit counseling briefing in person, by teleph	or to being
through the Internet.);	
☐ Active military duty in a military combat zone.	
Trouve initially daily in a initially contour zone.	
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit couns requirement of 11 U.S.C. § 109(h) does not apply in this district.	eling
I certify under penalty of perjury that the information provided above is true and correct	••
Signature of Debtor: /s/ Sarah Jeanne Belmar Sarah Jeanne Belmar	
Date: April 1, 2011	

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Eastern District of Missouri

		stern District of Wilsboard		
In re	Sarah Jeanne Belmar		Case No.	
mic	Drew Michael Belmar	Debtor(s)	Chapter	7
	EXHIBIT D - INDIVIDUAL DE CREDIT CO	BTOR'S STATEMENT DUNSELING REQUIR		ANCE WITH
can d credit anoth	Warning: You must be able to check eling listed below. If you cannot do so ismiss any case you do file. If that hap ors will be able to resume collection a er bankruptcy case later, you may be steps to stop creditors' collection activ	y, you are not eligible to pens, you will lose what ctivities against you. If y required to pay a secon	file a bankrup tever filing fee your case is dis	tcy case, and the court you paid, and your smissed and you file
and fi	Every individual debtor must file this I le a separate Exhibit D. Check one of the	0 0 1	v	
oppor a certi	■ 1. Within the 180 days before the fi eling agency approved by the United Statunities for available credit counseling at ficate from the agency describing the sendebt repayment plan developed through	ntes trustee or bankruptcy nd assisted me in perform rvices provided to me. <i>At</i>	administrator t ning a related b	hat outlined the udget analysis, and I have
oppor not ha certifi	□ 2. Within the 180 days before the fi eling agency approved by the United Statunities for available credit counseling at ve a certificate from the agency describing the serve apped through the agency no later than 14	ntes trustee or bankruptcy nd assisted me in perform ng the services provided vices provided to you and	administrator thing a related by to me. You must a copy of any of	hat outlined the udget analysis, but I do at file a copy of a debt repayment plan
	☐ 3. I certify that I requested credit cout the services during the seven days from a stances merit a temporary waiver of the	the time I made my requ	est, and the fol	lowing exigent

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

now. [Summarize exigent circumstances here.]

☐ 4. I am not required to receive a credit co	unseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for	- 11
1 0	§ 109(h)(4) as impaired by reason of mental illness or
± , ,	ealizing and making rational decisions with respect to
financial responsibilities.);	
☐ Disability. (Defined in 11 U.S.C.	§ 109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate	e in a credit counseling briefing in person, by telephone, or
through the Internet.);	
☐ Active military duty in a military of	combat zone.
☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in	y administrator has determined that the credit counseling in this district.
I certify under penalty of perjury that the	e information provided above is true and correct.
Signature of Debtor:	/s/ Drew Michael Belmar
4-6	Drew Michael Belmar
Date: April 1, 2011	

United States Bankruptcy Court Eastern District of Missouri

In re	Sarah Jeanne Belmar,		Case No.	
	Drew Michael Belmar			
		Debtors	Chapter	7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	150,000.00		
B - Personal Property	Yes	4	61,105.51		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		209,195.72	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	4		20,257.61	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			4,259.92
J - Current Expenditures of Individual Debtor(s)	Yes	2			4,775.17
Total Number of Sheets of ALL Schedu	ıles	18			
	T	otal Assets	211,105.51		
			Total Liabilities	229,453.33	

United States Bankruptcy Court Eastern District of Missouri

	Li	astern District of Missouri		
In re	Sarah Jeanne Belmar,		Case No.	
	Drew Michael Belmar			
-		Debtors	Chapter	7
	STATISTICAL SUMMARY OF C	ERTAIN LIARILITIES AN	ID RELATED DA	TA (28 ILS.C. 8 159)
				,
	you are an individual debtor whose debts are princase under chapter 7, 11 or 13, you must report al		01(8) of the Bankruptcy	Code (11 U.S.C.§ 101(8)), filing
a	case under enapter 7, 11 of 13, you must report at	i information requested below.		

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159. Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

State the following:

Average Income (from Schedule I, Line 16)	4,259.92
Average Expenses (from Schedule J, Line 18)	4,775.17
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	5,900.72

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		14,748.72
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		20,257.61
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		35,006.33

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ш	10

Sarah Jeanne Belmar, Drew Michael Belmar

Case No.

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property Nature of Debtor's Interest in Property Nature of Debtor's Wife, Wife, Joint, or Community Nature of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption Amount of Secured Claim	Location: 2029 Donnell Dr. Barnhart, MO 63012	Tenancy by Entirety	J	150,000,00	158.000.00
	Description and Location of Property		Wife, Joint, or	Debtor's Interest in Property, without Deducting any Secured	

Sub-Total > **150,000.00** (Total of this page)

Total > **150,000.00**

(Report also on Summary of Schedules)

In	re

Sarah Jeanne Belmar, Drew Michael Belmar

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	Cash	J	1,500.00
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit	Checking Account: 9714 Drew and Sarah Belmar Location: Vantage Credit Union 4020 Fee Fee Bridgeton, MO 63044	J	0.00
	unions, brokerage houses, or cooperatives.	Checking Account: 8215 Location: Vantage Credit Union 4020 Fee Fee Rd. Bridgeton, MO 63044	W	0.00
		Savings Account: 9714 Drew and Sarah Belmar Location: Vantage Credit Union 4020 Fee Fee Rd. Bridgeton, MO 63044	J	0.00
		Savings Account: 8215 Location: Vantage Credit Union 4020 Fee Fee Rd. Bridgeton, MO 63044	W	0.00
		Checking Account US BANK	J	50.00
		Saving Account US BANK	J	8.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Furniture: 1 bedroom set, couch, love seat, chair, recliner, dining set. Location: 2029 Donnell Dr. Barnhart, MO 63012	J	1,000.00
		Appliances: refridgerator, microwave, blender, stove, dishwasher Location: 2029 Donnell Dr. Barnhart, MO 63012	J	700.00

Sub-Total > 3,258.00 (Total of this page)

³ continuation sheets attached to the Schedule of Personal Property

In re	Sarah Jeanne Belmar
	Drew Michael Belmar

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
	Household: dishes Location: 2029 Donnell Dr. Barnhart, MO 63012	J	100.00
	Office: laptop computer Location: 2029 Donnell Dr. Barnhart, MO 63012	J	400.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	Books-Music: dvd's Location: 2029 Donnell Dr. Barnhart, MO 63012	J	50.00
6. Wearing apparel.	Clothes Location: 2029 Donnell Dr., Barnhart MO 63012	J	300.00
7. Furs and jewelry.	Jewelry: wedding band, engagement ring Location: 2029 Donnell Dr. Barnhart, MO 63012	J	2,000.00
8. Firearms and sports, photographic, and other hobby equipment.	x		
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	Insurance: Life Insurance Location: Farmer's New World Life Insurance Company	н	Unknown
10. Annuities. Itemize and name each issuer.	x		
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X		
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing	Retirement: 401 k Location: Merrill Lynch	W	5,098.28
plans. Give particulars.	Retirement: Retirement account Location: Prudential Retirement	Н	3,499.23
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	x		
14. Interests in partnerships or joint ventures. Itemize.	x		

Sub-Total > 11,447.51 (Total of this page)

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

In re	Sarah Jeanne Belmar
	Drew Michael Belmar

Case No.

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

		(00000000000000000000000000000000000000		
	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	х		
16.	Accounts receivable.	x		
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	x		
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	x		
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	x		
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	x		
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	x		
22.	Patents, copyrights, and other intellectual property. Give particulars.	x		
23.	Licenses, franchises, and other general intangibles. Give particulars.	x		
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	x		
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	Auto: 2005 Ford Escape Location: 2029 Donnell Dr. Barnhart, MO 63012	W	4,500.00
		(To	Sub-Tota of this page)	al > 4,500.00

Sheet **2** of **3** continuation sheets attached to the Schedule of Personal Property

In re	Sarah Jeanne Belmar
	Drew Michael Belmar

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
	Auto: 2005 Dodge Dakota Location: 2029 Donnell Dr. Barnhart, MO 63012	J	9,000.00
	Motorcycle	J	900.00
	2010 Chevy Traverse LT	J	32,000.00
26. Boats, motors, and accessories.	x		
27. Aircraft and accessories.	x		
28. Office equipment, furnishings, and supplies.	x		
29. Machinery, fixtures, equipment, and supplies used in business.	x		
30. Inventory.	x		
31. Animals.	Animals: dog, cat Location: 2029 Donnell Dr. Barnhart, MO 63012	J	0.00
32. Crops - growing or harvested. Give particulars.	x		
33. Farming equipment and implements.	x		
34. Farm supplies, chemicals, and feed.	X		
35. Other personal property of any kind not already listed. Itemize.	x		

Sub-Total > 41,900.00 (Total of this page)

Total > **61,105.51**

In re

(Check one box)

Retirement: 401 k

Motorcycle

Location: Merrill Lynch

Retirement: Retirement account

Location: Prudential Retirement

Sarah Jeanne Belmar, **Drew Michael Belmar**

Debtor claims the exemptions to which debtor is entitled under:

☐ Check if debtor claims a homestead exemption that exceeds

\$146,450. (Amount subject to adjustment on 4/1/13, and every three years thereafter

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

☐ 11 U.S.C. §522(b)(2) ■ 11 U.S.C. §522(b)(3) with respect to cases commenced on or after the date of add 11 U.S.C. §522(b)(3)					
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption		
Cash on Hand Cash	RSMo § 513.430.1(3) RSMo § 513.440	1,200.00 300.00	1,500.00		
Household Goods and Furnishings Furniture: 1 bedroom set, couch, love seat, chair, recliner, dining set. Location: 2029 Donnell Dr. Barnhart, MO 63012	RSMo § 513.430.1(1)	1,000.00	1,000.00		
Appliances: refridgerator, microwave, blender, stove, dishwasher Location: 2029 Donnell Dr. Barnhart, MO 63012	RSMo § 513.430.1(1)	700.00	700.00		
Household: dishes Location: 2029 Donnell Dr. Barnhart, MO 63012	RSMo § 513.430.1(1)	100.00	100.00		
Office: laptop computer Location: 2029 Donnell Dr. Barnhart, MO 63012	RSMo § 513.430.1(1)	400.00	400.00		
Books, Pictures and Other Art Objects; Collectibles Books-Music: dvd's Location: 2029 Donnell Dr. Barnhart, MO 63012	S RSMo § 513.430.1(1)	50.00	50.00		
Wearing Apparel Clothes Location: 2029 Donnell Dr., Barnhart MO 63012	RSMo § 513.430.1(1)	300.00	300.00		
Furs and Jewelry Jewelry: wedding band, engagement ring Location: 2029 Donnell Dr. Barnhart, MO 63012	RSMo § 513.430.1(2)	2,000.00	2,000.00		
Interests in Insurance Policies Insurance: Life Insurance Location: Farmer's New World Life Insurance Company	RSMo § 513.430.1(7)	0.00	Unknown		
Interests in IRA, ERISA, Keogh, or Other Pension o	r Profit Sharing Plans				

RSMo § 513.430.1(10)(f)

RSMo § 513.430.1(10)(f)

RSMo § 513.430.1(5)

RSMo § 513.430.1(5)

16,600.51 Total: 20,047.51

5,098.28

3.499.23

1,053.00

900.00

Automobiles, Trucks, Trailers, and Other Vehicles
Auto: 2005 Ford Escape

Location: 2029 Donnell Dr. Barnhart, MO 63012

5,098.28

3,499.23

4,500.00

900.00

⁰ continuation sheets attached to Schedule of Property Claimed as Exempt

In re

Sarah Jeanne Belmar, **Drew Michael Belmar**

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H W J	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONT _ NG EN	д>_	S P	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.			2011	Т	DATED			
Ally Financial PO Box 8116 Cockeysville, MD 21030		J	Purchase Money Security 2010 Chevy Traverse LT		ט			
			Value \$ 32,000.00				32,752.80	752.80
Account No.			Mortgage					
GMAC P.O. Box 4622 Waterloo, IA 50704		J	Location: 2029 Donnell Dr. Barnhart, MO 63012					
			Value \$ 150,000.00				158,000.00	8,000.00
Account No. xxxxxxxxxxxxx9001			04/01/2005					
Wells Fargo PO Box 29704 Phoenix, AZ 85038-9704		w	Car Loan Auto: 2005 Ford Escape Location: 2029 Donnell Dr. Barnhart, MO 63012					
			Value \$ 4,500.00				3,447.00	0.00
Account No. xxx-xxxxxxxxxx-9001 Wells Fargo			04/01/2010 Car Loan					
PO Box 660217 Dallas, TX 75266-0217		J	Auto: 2005 Dodge Dakota Location: 2029 Donnell Dr. Barnhart, MO 63012					
			Value \$ 9,000.00				14,995.92	5,995.92
continuation sheets attached			S (Total of th	ubt nis p			209,195.72	14,748.72
			(Report on Summary of Sc	_	ota ule	- I	209,195.72	14,748.72

In re

Sarah Jeanne Belmar, **Drew Michael Belmar**

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to

priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. \S 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$5,775* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,600* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

continuation sheets attached

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re	Sarah Jeanne Belma
	Drew Michael Belmar

Case No	
· · · · · · · · · · · · · · · · · · ·	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBLOR	± π ≥ ¬ ∪	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	UNLIQUIDAT	I T	<u> </u>	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxx6940			12/19/2008	T	TED		١	
Best Buy HSBC HSBC Retail Services PO Box 5238 Carol Stream, IL 60197-5238		Н	Store Card		D			1,631.77
Account No. xxxxxxxxxxxx6440		П	05/01/2006			T	†	
Care Credit GE Money Bank PO Box 960061 Orlando, FL 32896-0061		Н	Other Card					1,273.29
Account No. xxxxx7739	\dashv	Н	06/01/2009			H	\dagger	
Firestone Complete Auto Care Credit First NA PO Box 818026 Cleveland, OH 44181-8026		Н	Store Card					336.72
Account No. xxxxxx0251		\vdash	12/06/2010			H	\dagger	
Hearing Consultants PO Box 31217 St. Louis, MO 63131-0217		w	Medical					
								9.50
_3 continuation sheets attached			S (Total of t	Subt his				3,251.28

In re	Sarah Jeanne Belmar,	Case No.	
	Drew Michael Belmar		

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

The state of the s	_			T -	1	T.	T
CREDITOR'S NAME,	CO	Hus	band, Wife, Joint, or Community	− 6	U N	D	
MAILING ADDRESS	0	н	DATE CLAIM WAS INCURRED AND	Ň		I S P U T	
INCLUDING ZIP CODE,		W	CONSIDERATION FOR CLAIM. IF CLAIM	1	Q U	Ü	
AND ACCOUNT NUMBER		J	IS SUBJECT TO SETOFF, SO STATE.	N	11	ΙF	AMOUNT OF CLAIM
(See instructions above.)	R	С	is seedeled to selfort, so sittle.	G E N	D	Þ	
Account No. xxxxxxxxxxxx5294			06/01/2005	٦ï	DATED		
Halahara Diamanda			Store Card	\vdash	10	\vdash	
Helzberg Diamonds							
Helzberg Card		н					
PO Box 60107							
City of Industry, CA 91716-0107							
							213.20
Account No. xxxxxxxxxxx4689			10/01/2006				
			Charge Card				
Home Depot Credit Services							
PO Box 182676		н					
Columbus, OH 43218-2676							
							2,573.85
Account No. xxxxx828*1	Н		12/03/2010	+	╁		
			Medical				
Metro West Anesthesia Group inc							
PO Box 958864		w					
St. Louis, MO 63195-8864		``					
St. Louis, MO 63195-6664							
							148.00
Account No. xxxxxx1867		- 1	03/14/2005				
			Student Loan				
Missouri Higher Education Loan							
Authority		W					
PO Box 1022							
Chesterfield, MO 63006-1022							
·							1,000.00
Account No. xxxxxxxxxxx4862	\vdash	\dashv	08/25/2008	+	\vdash	-	·
THE STATE OF THE PROPERTY OF T			Credit Card				
Pulaski Bank					1		
		J			1	1	
Cardmenber Service		٦			1	1	
PO Box 790408							
St. Louis, MO 63179-0408							
							2,838.21
Sheet no. 1 of 3 sheets attached to Schedule of				Sub	tota	al	:
Creditors Holding Unsecured Nonpriority Claims			(Total of				6,773.26
Creations from the Consecuted Nonphority Claims			(10tai 01	uns	Paş	50)	

In re	Sarah Jeanne Belmar,	Case No.
	Drew Michael Belmar	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) Account No. xxxx1271 SSM Medical Group 10777 Sunset Office Dr. ste 210 Saint Louis, MO 63127	СООШВНОК	H ISJO	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. 12/03/2010 Medical	CONTINGENT	1.1	T E D	AMOUNT OF CLAIM 222.18
Account No. xxxx0565 SSM Medical Group 10777 Sunset Office Dr ste 210 St. Louis, MO 63127		w	09/14/2010 Medical				476.17
Account No. xxxx1271 SSM Medical Group 10777 Sunset Office Dr. ste 210 St. Louis, MO 63127		w	12/03/2010 Medical				222.18
Account No. xxxxxx0367 SSM St. Clare PO Box 503788 St. Louis, MO 63150-3788		w	11/10/2010 Medical				422.61
Account No. xxxxxx0251 SSM St. Clare Health Center PO Box 503788 St. Louis, MO 63150-3788		w	12/03/2010 Medical				376.00
Sheet no. 2 of 3 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Sub his			1,719.14

In re	Sarah Jeanne Belmar,	Case No.
	Drew Michael Belmar	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

							_	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu:	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	QULD	T	U T E	AMOUNT OF CLAIM
Account No. xxxxxx0011	Ī	Г	12/03/2010	Τ̈́	A T E D		Ī	
SSm St. Clare Health Center PO Box 503788 St. Louis, MO 63150-3788	-	w	Medical		D			1,054.00
Account No. x1812	╀	⊣	12/03/2010	+	+	+	\dashv	
St. Clare HC PHY Billing PO Box 504032 St. Louis, MO 63150-4032	-	w	Medical					
								5.79
Account No. x8590 St. Louis Surgical Center 760 Office Parkway Saint Louis, MO 63141		J	2009 Medical					
								554.14
Account No. xxxxxxxxxxx4073	╁		03/01/2006 Credit Card	+	\vdash	t	\dagger	
Target National Bank PO Box 660170 Dallas, TX 75266		w						
								6,900.00
Account No.	_							
Sheet no. 3 of 3 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub				8,513.93
Creations froming Onsecuted Ivonphority Claims			(Total of		pag Tota		ı	
			(Report on Summary of S				- 1	20,257.61

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Sarah Jeanne Belmar, Drew Michael Belmar

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

In re	Sarah Jeanne Belmar, Drew Michael Belmar

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

	Sarah Jeanne Belmar
re	Drew Michael Belmar

Case	Ν

Debtor(s)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:	DEPENDENT	TS OF DEBTOR	AND SPO	USE		
RELATIONSHIP(S): Daughter son			AGE(S): 2 3 mo	nthe		
Employment:	DEBTOR		3 1110	SPOUSE		
Occupation	Operation Coordinator	Public	Safety Di			
Name of Employer	Sorenson Communications		is County			
How long employed	2.5 years	4 years		·		
Address of Employer	12647 Olive Blvd. Ste. 250 Saint Louis, MO 63141	7900 F) 63105		
INCOME: (Estimate of average	ge or projected monthly income at time case filed)	Janit L		DEBTOR		SPOUSE
	, and commissions (Prorate if not paid monthly)		\$	3,187.50	\$	2,939.06
2. Estimate monthly overtime	, and commissions (Frotate if not paid monthly)		\$ 	0.00	\$ 	0.00
2. Estimate monthly overtime			Ψ	0.00	Ψ	0.00
3. SUBTOTAL			\$	3,187.50	\$	2,939.06
4. LESS PAYROLL DEDUCT	TIONS					
 a. Payroll taxes and socia 	l security		\$	526.82	\$	732.75
b. Insurance			\$	0.00	\$	403.93
c. Union dues			\$	0.00	\$	0.00
d. Other (Specify)	See Detailed Income Attachment		\$	80.00	\$	123.14
5. SUBTOTAL OF PAYROLL	DEDUCTIONS		\$	606.82	\$	1,259.82
6. TOTAL NET MONTHLY T	AKE HOME PAY		\$	2,580.68	\$	1,679.24
7. Regular income from operati	ion of business or profession or farm (Attach detailed s	tatement)	\$	0.00	\$	0.00
8. Income from real property			\$	0.00	\$	0.00
9. Interest and dividends			\$	0.00	\$	0.00
dependents listed above	upport payments payable to the debtor for the debtor's t	use or that of	\$	0.00	\$	0.00
11. Social security or governme (Specify):	ent assistance		\$	0.00	\$	0.00
(Speeny).			\$ 	0.00	\$ 	0.00
12. Pension or retirement incor	ne		\$ 	0.00	\$	0.00
13. Other monthly income			Ψ	0.00	Ψ	0.00
(Specify):			\$	0.00	\$	0.00
(Speeny).			\$	0.00	\$	0.00
14. SUBTOTAL OF LINES 7	THROUGH 13		\$	0.00	\$	0.00
15. AVERAGE MONTHLY IN	NCOME (Add amounts shown on lines 6 and 14)		\$	2,580.68	\$	1,679.24
16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15)				\$	4,259.	.92

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: **None**

In r

In re Sarah Jeanne Belmar Drew Michael Belmar

Case I	Vo	

Debtor(s)

$\frac{SCHEDULE\ I-CURRENT\ INCOME\ OF\ INDIVIDUAL\ DEBTOR(S)}{Detailed\ Income\ Attachment}$

Other Payroll Deductions:

401 (k)	\$ 0.00	\$ 103.59
AD&D	\$ 0.00	\$ 2.71
Deffered Comp Plan	\$ 60.00	\$ 0.00
Parking	\$ 20.00	\$ 0.00
Short Term Disability	\$ 0.00	\$ 16.84
Total Other Payroll Deductions	\$ 80.00	\$ 123.14

Sarah Jeanne	Belmar
Drew Michael	Relmar

	Case No.				
)ahtar(a)	•	-			

Debtor(s)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. expenditures labeled "Spouse."	Complete a separate	e schedule of
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	1,135.83
a. Are real estate taxes included? Yes X No		
b. Is property insurance included? Yes X No		
2. Utilities: a. Electricity and heating fuel	\$	132.00
b. Water and sewer	\$	30.00
c. Telephone	\$	0.00
d. Other See Detailed Expense Attachment	\$	382.80
3. Home maintenance (repairs and upkeep)	\$	25.00
4. Food	\$	600.00
5. Clothing	\$	25.00
6. Laundry and dry cleaning	\$	15.00
7. Medical and dental expenses	\$	200.00
8. Transportation (not including car payments)	\$	400.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	50.00
10. Charitable contributions	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	0.00
b. Life	\$	19.00
c. Health	\$	399.40
d. Auto	\$	151.00
e. Other disability ins	\$	15.54
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify) personal property tax	\$	33.52
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in plan)	the	
a. Auto	\$	454.00
b. Other	\$	0.00
c. Other	\$	0.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other See Detailed Expense Attachment	\$	707.08
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedule if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	s and, \$	4,775.17
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the y following the filing of this document:20. STATEMENT OF MONTHLY NET INCOME	rear	
a. Average monthly income from Line 15 of Schedule I	\$	4,259.92
b. Average monthly expenses from Line 18 above	\$	4,775.17
c Monthly net income (a minus h)	\$	-515 25

Sarah Jeanne Belmar
In re Drew Michael Belmar

Debtor(s)	

Case No.

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Detailed Expense Attachment

Other Utility Expenditures:

Sewer	\$ 20.00
Trash	\$ 21.00
Cell phones	\$ 139.35
cable/internet	\$ 134.45
Gas	\$ 68.00
Total Other Utility Expenditures	\$ 382.80

Other Expenditures:

Day care	\$ 650.00
Gym memberships	\$ 30.00
Subdivision dues	\$ 27.08
Total Other Expenditures	\$ 707.08

United States Bankruptcy Court Eastern District of Missouri

In re	Sarah Jeanne Belmar Drew Michael Belmar		Case No.	
		Debtor(s)	Chapter	7

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

	I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _ sheets, and that they are true and correct to the best of my knowledge, information, and belief.			
Date	April 1, 2011	Signature	/s/ Sarah Jeanne Belmar Sarah Jeanne Belmar Debtor	
Date	April 1, 2011	Signature	/s/ Drew Michael Belmar Drew Michael Belmar Joint Debtor	

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

United States Bankruptcy Court Eastern District of Missouri

In re	Sarah Jeanne Belmar Drew Michael Belmar	Case No.		
-		Debtor(s) Chapter	7	

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT \$7,110.57	SOURCE 2011 Wife Sorenson Communications
\$36,507.76	2010 Wife Sorenson Communications
\$32,547.55	2009 Wife Sorenson Communications
\$8,119.30	2011 Husband St. Louis County Police
\$35,615.02	2010 Husband St. Louis County Police
\$32,627.09	2009 Husband St. Louis County Police

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR Wells Fargo PO Box 29704 Phoenix, AZ 85038-9704	DATES OF PAYMENTS 12/22/2010, 02/02/11, 03/02/2011	AMOUNT PAID \$1,428.00	AMOUNT STILL OWING \$3,447.00
Wells Fargo PO Box 660217 Dallas, TX 75266-0217	12/22/10, 01/21/11, 03/07/11	\$1,272.36	\$14,995.92

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT
DATES OF PAID OR
PAYMENTS/ VALUE OF AMOUNT STILL
TRANSFERS TRANSFERS OWING

NAME AND ADDRESS OF CREDITOR

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION. FORECLOSURE SALE. TRANSFER OR RETURN

DESCRIPTION AND VALUE OF **PROPERTY**

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN

NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or** since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Farrell Law Firm 13610 Barretll Office Dr, Ste 203 Ballwin, MO 63021 DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR 3/31/2011 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$900.00

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

NSFER(S) IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND NATURE OF BUSINESS ENDING DATES

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

-

NAME

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

21 . Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	April 1, 2011	Signature	/s/ Sarah Jeanne Belmar	
		-	Sarah Jeanne Belmar	
			Debtor	
Date	April 1, 2011	Signature	/s/ Drew Michael Belmar	
		C	Drew Michael Belmar	
			Joint Debtor	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

United States Bankruptcy Court Eastern District of Missouri

	Sarah Jeanne Belmar			
In re	Drew Michael Belmar		Case No.	
		Debtor(s)	Chapter	7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A - Debts secured by property of the estate. (Part A must be fully completed for **EACH** debt which is secured by property of the estate. Attach additional pages if necessary.)

property of the estate. Attach additional pages in	f necessary.)
Property No. 1	
Creditor's Name: Ally Financial	Describe Property Securing Debt: 2010 Chevy Traverse LT
Property will be (check one):	
☐ Surrendered ■ Retained	ed
If retaining the property, I intend to (check at least one): ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain (for example	e, avoid lien using 11 U.S.C. § 522(f)).
Property is (check one):	
☐ Claimed as Exempt	■ Not claimed as exempt
Property No. 2	
Creditor's Name: GMAC	Describe Property Securing Debt: Location: 2029 Donnell Dr. Barnhart, MO 63012
Property will be (check one):	
☐ Surrendered ■ Retained	ed
If retaining the property, I intend to (check at least one): ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain _ Retain_ (for example, avoid lien using the property)	ng 11 U.S.C. § 522(f)).
Property is (check one):	
☐ Claimed as Exempt	■ Not claimed as exempt

38 (Form 8) (12/08)		_	Page 2
Property No. 3			
Creditor's Name: Wells Fargo		Describe Property S Auto: 2005 Ford Esc Location: 2029 Donn	
Property will be (check one):		!	
☐ Surrendered	Retained		
If retaining the property, I intend to (check ☐ Redeem the property ☐ Reaffirm the debt	at least one):		
☐ Other. Explain	(for example, avo	oid lien using 11 U.S.C	. § 522(f)).
Property is (check one):			
■ Claimed as Exempt		☐ Not claimed as exe	empt
		1	
Property No. 4			
Creditor's Name: Wells Fargo		Describe Property S Auto: 2005 Dodge D Location: 2029 Don	
Property will be (check one):			
■ Surrendered	☐ Retained		
If retaining the property, I intend to (check ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain		oid lien using 11 U.S.C	. § 522(f)).
Property is (check one):			
☐ Claimed as Exempt		■ Not claimed as exe	empt
PART B - Personal property subject to une Attach additional pages if necessary.)	xpired leases. (All three	columns of Part B mu	st be completed for each unexpired lease.
Property No. 1			
Lessor's Name: -NONE-	Describe Leased Pro	operty:	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): ☐ YES ☐ NO

B8 (Form 8) (12/08) Page 3

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date	April 1, 2011	Signature	/s/ Sarah Jeanne Belmar	
		-	Sarah Jeanne Belmar	
			Debtor	
Date	April 1, 2011	Signature	/s/ Drew Michael Belmar	
		C	Drew Michael Belmar	
			Ioint Debtor	

United States Bankruptcy Court Eastern District of Missouri

		I	Eastern District of Missouri			
In re	Sarah Jeanne B Drew Michael B			Case No		
111 10	Diew Michael B	eiiiai	Debtor(s)	Chapter	7	_
1. F			PENSATION OF ATTOR Rule 2016(b), I certify that I as			ha
c	ompensation paid to 1	me within one year before the	e filing of the petition in bankruptcy ion of or in connection with the ban	, or agreed to be p	paid to me, for services rendered or	
	For legal services.	, I have agreed to accept		\$	900.00	
	Prior to the filing	of this statement I have receive	ved	\$	900.00	
	Balance Due			\$	0.00	
2. 1	The source of the comp	pensation paid to me was:				
	Debtor	☐ Other (specify):				
3. Т	The source of compens	sation to be paid to me is:				
	Debtor	☐ Other (specify):				
4. I	■ I have not agreed to	o share the above-disclosed co	ompensation with any other person	unless they are me	mbers and associates of my law fire	n.
I			pensation with a person or persons we names of the people sharing in the			
5. 1	n return for the above	e-disclosed fee, I have agreed	to render legal service for all aspects	s of the bankruptcy	y case, including:	
b c	Preparation and filiRepresentation of the[Other provisions as	ng of any petition, schedules, he debtor at the meeting of cross needed]	endering advice to the debtor in dete statement of affairs and plan which editors and confirmation hearing, an	may be required; and any adjourned h	earings thereof;	-1-
	preparation	and filing of motions pu	to reduce to market value; exersuant to 11 USC 522(f)(2)(A) f	or avoidance of	liens on household goods.	۱,
6. E	Representa		d fee does not include the following dischargeability actions, reaf adversary proceeding.		ments, judicial lien avoidance	s,
			CERTIFICATION			_
	certify that the forego ankruptcy proceeding.		f any agreement or arrangement for	payment to me for	representation of the debtor(s) in	
Dated	: April 1, 2011		/s/ Margaret Farre	ell		
			Margaret Farrell			

Farrell Law Firm

Ballwin, MO 63021

13610 Barretll Office Dr, Ste 203

314-965-1800 Fax: 314-529-3438 margaret@farrelllawoffices.com

WARNING: Effective December 1, 2009, the 15-day deadline to file schedules and certain other documents under Bankruptcy Rule 1007(c) is shortened to 14 days. For further information, see note at bottom of page 2

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF MISSOURI

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Many filing deadlines change on December 1, 2009. Of special note, 12 rules that set 15 days to act are amended to require action within 14 days, including Rule 1007(c), filing the initial case papers; Rule 3015(b), filing a chapter 13 plan; Rule 8009(a), filing appellate briefs; and Rules 1019, 1020, 2015, 2015.1, 2016, 4001, 4002, 6004, and 6007.

B 201B (Form 201B) (12/09)

United States Bankruptcy Court Eastern District of Missouri

In re	Sarah Jeanne Belmar Drew Michael Belmar		Case No.	
		Deb	tor(s) Chapter	7
			TO CONSUMER DEBTO BANKRUPTCY CODE	OR(S)
Code.	I (We), the debtor(s), affirm that I (we) h	Certification of any received and real	22 20 101	d by § 342(b) of the Bankruptcy
	Jeanne Belmar Michael Belmar	X	/s/ Sarah Jeanne Belmar	April 1, 2011
Printe	d Name(s) of Debtor(s)		Signature of Debtor	Date
Case N	No. (if known)	X	/s/ Drew Michael Belmar	April 1, 2011
			Signature of Joint Debtor (if a	ny) Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

United States Bankruptcy Court Eastern District of Missouri

In re	Drew Michael Belmar		Case No.	
		Debtor(s)	Chapter	7
	VERIFICAT	ION OF CREDITOR M	MATRIX	
contai compl	The above named debtor(s) hereby certaining the names and addresses of my createte.	•		
F				
		/s/ Sarah Jeanne Be	lmar	
		Sarah Jeanne Belma	ar	
		Debtor		
		/s/ Drew Michael Bel	lmar	
		Drew Michael Belma	ar	
		Joint Debtor		
		Dated: April 1, 20	011	

Sarah Jeanne Belmar

Ally Financial PO Box 8116 Cockeysville, MD 21030

Best Buy HSBC HSBC Retail Services PO Box 5238 Carol Stream, IL 60197-5238

Care Credit GE Money Bank PO Box 960061 Orlando, FL 32896-0061

Firestone Complete Auto Care Credit First NA PO Box 818026 Cleveland, OH 44181-8026

GMAC P.O. Box 4622 Waterloo, IA 50704

Hearing Consultants PO Box 31217 St. Louis, MO 63131-0217

Helzberg Diamonds Helzberg Card PO Box 60107 City of Industry, CA 91716-0107

Home Depot Credit Services PO Box 182676 Columbus, OH 43218-2676

Metro West Anesthesia Group inc PO Box 958864 St. Louis, MO 63195-8864

Missouri Higher Education Loan Authority PO Box 1022 Chesterfield, MO 63006-1022

Pulaski Bank Cardmenber Service PO Box 790408 St. Louis, MO 63179-0408

SSM Medical Group 10777 Sunset Office Dr. ste 210 Saint Louis, MO 63127 SSM Medical Group 10777 Sunset Office Dr ste 210 St. Louis, MO 63127

SSM Medical Group 10777 Sunset Office Dr. ste 210 St. Louis, MO 63127

SSM St. Clare PO Box 503788 St. Louis, MO 63150-3788

SSM St. Clare Health Center PO Box 503788 St. Louis, MO 63150-3788

St. Clare HC PHY Billing PO Box 504032 St. Louis, MO 63150-4032

St. Louis Surgical Center 760 Office Parkway Saint Louis, MO 63141

Target National Bank PO Box 660170 Dallas, TX 75266

Wells Fargo PO Box 29704 Phoenix, AZ 85038-9704

Wells Fargo PO Box 660217 Dallas, TX 75266-0217

In re	Sarah Jeanne Belmar Drew Michael Belmar	According to the information required to be entered on this statement
	Debtor(s)	(check one box as directed in Part I, III, or VI of this statement):
Case N	Number:	☐ The presumption arises.
	(If known)	■ The presumption does not arise.
		\square The presumption is temporarily inapplicable.

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

	Part I. MILITARY AND NON-CONSUMER DEBTORS
1A	Disabled Veterans. If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
171	□ Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).
1B	Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.
1C	□ Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
	a. I was called to active duty after September 11, 2001, for a period of at least 90 days and I remain on active duty /or/ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;
	OR
	 b. ☐ I am performing homeland defense activity for a period of at least 90 days /or/ ☐ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.

		Part II. CALCULATION OF M	10l	NTHLY INCO	ME	FOR § 707(b)(7) I	EXCLUSION		
		tal/filing status. Check the box that applies					emei	nt as directed.		
		Unmarried. Complete only Column A ("L								
		Married, not filing jointly, with declaration								
2		"My spouse and I are legally separated under purpose of evading the requirements of § 70°								
2		for Lines 3-11.	/(ט)(2)(A) of the bankit	apic:	y Code. Complete (лпу	Column A (Del	owi	s income)
		Married, not filing jointly, without the decl	larati	on of separate hous	sehol	lds set out in Line 2.	b ab	ove. Complete b	oth	Column A
		("Debtor's Income") and Column B ("Spo						•		
	d.	Married, filing jointly. Complete both Col	lumn	A ("Debtor's Inc	ome	") and Column B (Spo	ouse's Income'')	for	Lines 3-11.
		gures must reflect average monthly income r						Column A		Column B
		dar months prior to filing the bankruptcy cas						Debtor's		Spouse's
		ling. If the amount of monthly income varied onth total by six, and enter the result on the			, you	i must divide the		Income		Income
3		s wages, salary, tips, bonuses, overtime, co					\$	2,787.18	\$	3,113.54
		ne from the operation of a business, profes			Lin	e h from Line a and	Ψ	2,707.10	Ψ	0,110.04
		the difference in the appropriate column(s) of						ļ		
	busin	ess, profession or farm, enter aggregate num	bers	and provide details	on	an attachment. Do		ļ		
		nter a number less than zero. Do not include	e any	part of the busing	ess e	expenses entered on		ļ		
4	Line	b as a deduction in Part V.		Dahtan		C		ļ		
	a.	Gross receipts	\$	Debtor 0.00	\$	Spouse 0.00		ļ		
	b.	Ordinary and necessary business expenses	\$	0.00		0.00		ļ		
	c.	Business income	Su	btract Line b from	Line	e a	\$	0.00	\$	0.00
	Rents	s and other real property income. Subtract	Lin	e b from Line a and	lente	er the difference in				
		oppropriate column(s) of Line 5. Do not enter						ļ		
5	part o	of the operating expenses entered on Line	b as		rt V.		ıl	ļ		
3	a.	Gross receipts	\$	Debtor 0.00	2	Spouse 0.00		ļ		
	b.	Ordinary and necessary operating expenses	_	0.00		0.00		ļ		
	c.	Rent and other real property income		btract Line b from			\$	0.00	\$	0.00
6	Inter	est, dividends, and royalties.					\$	0.00	\$	0.00
7	Pensi	on and retirement income.					\$	0.00	\$	0.00
		amounts paid by another person or entity,								
8		nses of the debtor or the debtor's depender						ļ		
0		ose. Do not include alimony or separate main se if Column B is completed. Each regular p						ļ		
		ayment is listed in Column A, do not report to				ii omy one column,	\$	0.00	\$	0.00
	_	nployment compensation. Enter the amount		•		s) of Line 9.				
	Howe	ever, if you contend that unemployment com	pens	ation received by y	ou o	r your spouse was a		ļ		
9		it under the Social Security Act, do not list t		nount of such comp	pens	ation in Column A		ļ		
		but instead state the amount in the space bel	ow:							
		mployment compensation claimed to benefit under the Social Security Act Debte	or\$	0.00 Sp	ouse	\$ 0.00	\$	0.00	\$	0.00
		ne from all other sources. Specify source an	nd ar	nount If necessary	lict	t additional sources	Ψ	0.00	Ψ	0.00
		separate page. Do not include alimony or se						ļ		
		se if Column B is completed, but include al						ļ		
		tenance. Do not include any benefits receive								
10		wed as a victim of a war crime, crime against estic terrorism.	hum	anity, or as a victin	101	international or				
	dome	ste terrorism.		Debtor	Г	Spouse				
	a.		\$		\$					
	b.		\$		\$					
		and enter on Line 10					\$	0.00	\$	0.00
11		otal of Current Monthly Income for § 707(\$	2,787.18	¢	3,113.54
	Colui	mn B is completed, add Lines 3 through 10 is	11 C0	iumm d. Emer the	wial	1(5).	φ	2,101.10	Ψ	3,113.34

12	Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.		5,900.72
	Part III. APPLICATION OF § 707(b)(7) EXCLUSION		
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result.	\$	70,808.64
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)		
	a. Enter debtor's state of residence: MO b. Enter debtor's household size: 4	\$	69,832.00
15	Application of Section 707(b)(7). Check the applicable box and proceed as directed. ☐ The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII.	does no	ot arise" at the
	■ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.		

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

	Enter the amount from Line 12.	\$	5,900.72
17	Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in L Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you not check box at Line 2.c, enter zero.	the	
	a. \$ b. \$		
	c. \$		
	d. \$ Total and enter on Line 17	\$	0.00
18	Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result.	\$	5,900.72
	Part V. CALCULATION OF DEDUCTIONS FROM INCOME		
	Subpart A: Deductions under Standards of the Internal Revenue Service (IR	S)	
19A	National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS Nati Standards for Food, Clothing and Other Items for the applicable number of persons. (This information is ava at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the results of the persons is the results.		
	that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.	number \$	1,377.00
19B	that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of perwho are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of a older. (The applicable number of persons in each age category is the number in that category that would curre be allowed as exemptions on your federal income tax return, plus the number of any additional dependents of you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.	\$ ersons ge or rently whom t in	1,377.00
	that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of per who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of a older. (The applicable number of persons in each age category is the number in that category that would curred be allowed as exemptions on your federal income tax return, plus the number of any additional dependents of you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B. Persons under 65 years of age Persons 65 years of age or older Allowance per person	\$ ersons ge or rently whom t in	1,377.00
	that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of per who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of a older. (The applicable number of persons in each age category is the number in that category that would curred be allowed as exemptions on your federal income tax return, plus the number of any additional dependents of you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B. Persons under 65 years of age Persons 65 years of age or older Allowance per person 4 b2. Number of persons	\$ ersons ge or rently whom t in in Line	1,377.00

	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any				
20B	debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero.				
	a. IRS Housing and Utilities Standards; mortgage/rental expense	\$	931.00		
	b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42	\$	1,135.83		
	c. Net mortgage/rental expense	Subtract Line b from Line a	l.	\$	0.00
21	Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:			·	0.00
	T 1.54	4.4.		\$	0.00
	Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.				
22A	Check the number of vehicles for which you pay the operating expens included as a contribution to your household expenses in Line 8.	es or for which the operating	expenses are		
	□ 0 □ 1 ■ 2 or more.	.c. max la l			
	If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)				4.00
	Local Standards: transportation; additional public transportation				
22B	for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for you public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy				0.00
	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)			\$	0.00
	□ 1 ■ 2 or more.				
23	Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero.				
	a. IRS Transportation Standards, Ownership Costs	\$	496.00		
	Average Monthly Payment for any debts secured by Vehicle b. 1, as stated in Line 42	\$	0.00		
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.		\$ 496	6.00
24	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero.				
	a. IRS Transportation Standards, Ownership Costs \$ 200.00				
	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$	0.00		
	c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.		\$ 200	0.00
25	Other Necessary Expenses: taxes. Enter the total average monthly extate and local taxes, other than real estate and sales taxes, such as increasecurity taxes, and Medicare taxes. Do not include real estate or sale	ome taxes, self employment ta		\$ 1,259	9.57

26	Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs.			
	Do not include discretionary amounts, such as voluntary 401(k) contributions. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term			0.00
27	life insurance for yourself. Do not include premiums for			0.00
28	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.			0.00
29	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.			0.00
30	Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.			0.00
31	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.			0.00
32	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.			0.00
33	Total Expenses Allowed under IRS Standards. Enter	the total of Lines 19 through 32.	\$	4,477.57
24	Health Insurance, Disability Insurance, and Health Sa the categories set out in lines a-c below that are reasonab dependents.	avings Account Expenses. List the monthly expense oly necessary for yourself, your spouse, or your	es in	
34	a. Health Insurance	\$ 403.93		
	b. Disability Insurance	\$ 0.00		
İ	c. Health Savings Account	\$ 0.00	\$	403.93
	Total and enter on Line 34.			
	If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: \$			
35	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.		cally	0.00
36	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.			0.00
37	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.			0.00
20	Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.			
38	school by your dependent children less than 18 years of a documentation of your actual expenses, and you must	age. You must provide your case trustee with explain why the amount claimed is reasonable and		0.00

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

39	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.			\$	0.00	
40	Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).			\$	0.00	
41	Total Additional Expense Deductions	s under § 707(b). Enter the total of l	Lines 34 through 40		\$	403.93
	St	ubpart C: Deductions for De	bt Payment		•	
42	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, and state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.					
	Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?		
	a. GMAC	Location: 2029 Donnell Dr. Barnhart, MO 63012	\$ 1,135.83	□yes ■no		
			Total: Add Lines		\$	1,135.83
43	Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. Name of Creditor Property Securing the Debt 1/60th of the Cure Amount aNONE-					
	aNONE-			Total: Add Lines	\$	0.00
44	Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 28.			\$	0.00	
	Chapter 13 administrative expenses. If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense.					
45	issued by the Executive Office information is available at www the bankruptcy court.)	trict as determined under schedules for United States Trustees. (This w.usdoj.gov/ust/ or from the clerk of	\$ x	4.60		
	c. Average monthly administrativ		Total: Multiply Lin	es a and b	\$	0.00
46	Total Deductions for Debt Payment.	-			\$	1,135.83
	Su	ibpart D: Total Deductions f	rom Income			
47	Total of all deductions allowed under	§ 707(b)(2). Enter the total of Lines	33, 41, and 46.		\$	6,017.33
	Part VI. DE	TERMINATION OF § 707()	b)(2) PRESUMP	TION		
48	Enter the amount from Line 18 (Current monthly income for § 707(b)(2))			\$	5,900.72	
49	Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))			\$	6,017.33	
50	Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result.			\$	-116.61	
51	60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result.			\$	-6,996.60	

	Initial presumption determination. Check the applicable box and proceed as directed.				
52	■ The amount on Line 51 is less than \$7,025*. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.				
32	☐ The amount set forth on Line 51 is more than \$11,725* Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI.				
	☐ The amount on Line 51 is at least \$7,025*, but not more than \$11,725*. Complete the remainder of Part VI (Lines 53 to 1).				
53	Enter the amount of your total non-priority unsecured debt	\$			
54	Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and	l enter the result.	\$		
	Secondary presumption determination. Check the applicable box and proceed as directed	i.			
55	☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.				
	☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.				
	Part VII. ADDITIONAL EXPENSE CLAIN	1S			
56	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of				
	you and your family and that you contend should be an additional deduction from your curr 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures sho				
	each item. Total the expenses.	, and a second	, , , , , , , , , , , , , , , , , , ,		
	Expense Description Monthly Amount				
	a. \$				
	b. \$				
	c. \$				
	d. \$ Total: Add Lines a, b, c, and d \$				
Part VIII. VERIFICATION					
	I declare under penalty of perjury that the information provided in this statement is true and	correct. (If this is a join	t case, both debtors		
	must sign.)				
		arah Jeanne Belmar Ih Jeanne Belmar			
57	Sara	(Debtor)			
	Date: April 1, 2011 Signature /s/ D	rew Michael Belmar			
		v Michael Belmar			
		(Joint Debtor, if ar	ıy)		

^{*} Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.